Application or Docket Number

Substitute for Form PTO-875								09	941	681
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL E	SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR		NUMBER	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
BASIC FEE					\$	OR		\$		
(37 CFR 1.16(a)) TOTAL CLAIMS					x s =		OR	x \$=		
(37 CFR 1.18(c))			minus 20 =			× \$=				
INDEPENDENT CLAIMS (37 CFR 1.16(b))			minus 3 = *			x s=		OR	× \$ =	
MULTI	PLE DEPENDEN	IT CLAIM PRESENT	r (37	CFR 1.16(d))	+\$=		OR	+ \$=		
* If the difference in column 1 is less than zero, enter *0" in column 2.						TOTAL	l	OR	TOTAL	
		AIMS AS A ME								
6-7-0-4 (Column 1) (Column 2) (Column 3)				SMALL	SMALL ENTITY		OTHER SMALL			
A		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.16(e))	AMENDMENT.	Minus	- 22	• /	. x s=	•	OR	x \$=	•
묇	Independent (37 CFR 1.16(b))	. 1	Minus	<i>3</i>	2	x \$=		OR	x s=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$=		OR	+ \$=	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Caluma 1)		(Column 2)	(Column 3)					
A F		(Column 1) CLAIMS REMAINING AFTER. AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total (3F CFR 1.16(cl)	22	Minus	- 22	-	x \$=		OR	x s=	
Q	independent (37 CFR 1.16(b))	- 1	Minus	3	° — ·	x \$=		OR	x s=	
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))					+5 =		OR	+5_=	
FUGI FRESENTATION OF MALER CLUB AND					TOTAL ADOL FEE		OR	TOTAL ADD'L FEE		
	•			/Markers - MA	(Cali 21			-		
(Column 1) (Calumn 2) (Calumn 3) CLAIMS HIGHEST					1		7-	0475	ADDF	
ပ		REMAINING		NUMBER PREVIOUSLY	PRESENT	RATE	ADDI- TIONAL	1	RATE	TIONAL
Z		AFTER AMENDMENT		PAID FOR			FEE			FEE
NDMENT	Total (37 CFR 1.16(c))	. 75	Minus	- 22	-	x \$=		OR	x \$=	<u> </u>
	Independent (37 CFR 1.15(b))	•	euniM	3	• /	x s=		OR	x s=	
AM						+ \$=		OR	+ \$ =	<u> </u>
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		column 1 is less th Number Previous	L. David bro	PIN INCOMPAGE	- 13 1033 High Pr	n 3.), enter 720 °.				
	the "Highest" יי או איז יי	Number Previous	y Paid Fo	IN THIS SPACE	is less than 3.	enter "3". hest number found	in the approp	ni xod elsin	column 1.	

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.